

**Check Casher Permit Program (CCPP)**  
**P.O. Box 903387**  
**Sacramento, CA 94203-3870**  
**(916) 227-3250**  
**[www.oag.ca.gov/casher](http://www.oag.ca.gov/casher)**

**INFORMATION AND INSTRUCTIONS**

**FEES**

- The permit processing fee for a business location or mobile unit is \$50.00 per store or per mobile unit. The fee to process a fingerprint card if you are outside of California is \$32.00. See FINGERPRINT SUBMISSION for further detail about submitting fingerprints.

**NOTE:** The fees are non refundable. Cash will not be accepted for payment. Make remittance payable to "Department of Justice."

**PART A. OWNERSHIP INFORMATION**

- Who must apply? Every owner of a "Check Cashing Business" in California, i.e., one that for compensation engages in the business of cashing checks, warrants, drafts, money orders, or other commercial paper serving the same purpose. A "Check Cashing Business" does not include a state or federally chartered bank, savings association, credit union, or industrial loan company.
- Check the appropriate box to identify the "Type of Ownership" the business is. If the business is owned by an individual (sole proprietor), complete owner information in Number 1 of Part A. If the business is owned by a partnership or corporation, all partners (for partnerships) or all officers and shareholders with 10% or more ownership (for corporations) signing the application must be listed in Number 1 through 4 of Part A. A partner (for partnerships) or authorized officer (for corporations) signing the application must be listed in Number 1 of Part A. Attach another sheet for additional partners/officers/shareholders.  
**NOTE:** If you are an LLC or a corporation you will need to provide a copy of your original Statement of Information which is filed with the Secretary of State. You may order this document through their website at: [www.sos.ca.gov/business/or](http://www.sos.ca.gov/business/or) call (916) 657-5448.
- **NOTE: Disclosure of the social security numbers (SSN) of all parties to the application is mandatory.** Both Section 30 of the Business and Profession Code and Public Law 94-455 (42 USCA 405(c)(2)(C)(i)) authorize collection of your SSN. Your SSN may be disclosed to state, federal, city and county government agencies and will be used exclusively for tax purposes and for purposes of compliance with any judgement or order for family support in accordance with state and/or federal law.

**PART B. BUSINESS INFORMATION**

- Complete all information regarding the business for which a permit is required including the business bank information. If there are additional business locations for which a permit is required, attach another sheet with the same requested information. A permit is valid for one year from the date of issuance.
- If you intend to operate a mobile check cashing business, you must complete form BCIA 4130, "Application for Check Casher Permit" and form BCIA 4000, "Supplemental Application for Mobile Check Cash Cashing Unit."

### **PART C. PARTNERSHIP/CORPORATE INFORMATION**

- If the partnership or corporate name is different from the business name (DBA: doing business as) in Part B complete all information regarding the partnership/corporation.

### **PART D. ADDITIONAL INFORMATION**

- Part D applies to all owners (sole proprietor), partners (for partnerships) or all officers and shareholders with 10% or more ownership (for corporations). If two or more parties to the application answers “yes” to D.1 or D.2, each must complete a separate Section D by providing the requested information on another sheet that is signed and dated by the affected party.

**NOTE:** The Department may refuse to issue a permit to any individual as a check casher if there is substantial misstatement or data omission. **Failure to disclose this information will result in an automatic denial of the issuance of your permit.**

### **PART E. CERTIFICATION**

- Where the business is owned by an individual (sole proprietor), the application must be signed by the owner. Where the business is owned by a partnership or corporation, the application must be signed by one of the partners or officers who is authorized to sign for the partnership or corporation.

### **FINGERPRINT SUBMISSION**

- Every party to this application (applicant/partner/corporate officer/shareholder with 10% or more ownership) must submit a completed (Request for Live Scan Service) fingerprint request form BCII 8016. This must be one of the forms provided by the Check Cashier Permit Program (CCPP) with the identifying agency information, or downloaded from this web site.

**NOTE:** A fingerprint submission is not required if you are the owner/partner/corporate officer/shareholder with 10% or more ownership of a business with an active check casher permit from the Department of Justice.

- Live scan forms specific to the Check Cashier Permit Program are available on this web site and may be downloaded. Use a separate application form for each applicant.
- Live scan fingerprint services may be obtained at most law enforcement agencies, however to obtain the most current live scan fingerprint services available in your area, you may go on-line to the following:

ATTORNEY GENERAL HOME PAGE

<http://oag.ca.gov>

or

<http://ag.ca.gov/fingerprints/publications/contact.php>

**NOTE:** The **fingerprint processing fee** for each new owner (applicant/partner/corporate officer/shareholder with 10% or more ownership) is to be paid at the agency where live scan fingerprint services are obtained. Applicants are encouraged to contact the agency to determine if an appointment for fingerprinting is recommended and if any additional fees apply.

**Mail your completed application, a copy of each request for Live Scan Service form BCII 8016, and a check or money order with the proper fees to the address listed at the top of this form.**